

L10000020926

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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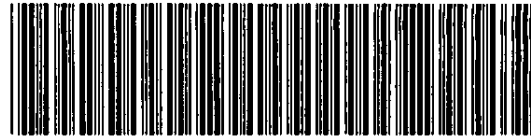
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
13 MAY 13 PM 3:08

MAY 14 2013
T. HARRINGTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **BEQUEEN 36 LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MARIO GUZMAN

Name of Person

G & G MANAGEMENT US LLC

Firm/Company

9130 S DADELAND BLVD STE 1509

Address

MIAMI, FLORIDA 33156

City/State and Zip Code

MGUZMAN@GUZMANANDGUZMAN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MARIO GUZMAN

Name of Person

at (**305 6701991**)

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

BEQUEEN 36 LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 03/10/2010 and assigned
Florida document number L 10000026926.

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

9130 S DADELAND BLVD SUITE # 1509

MIAMI, FL 33156

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9130 S DADELAND BLVD SUITE # 1509

MIAMI, FL 33156

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

GUZMAN & GUZMAN P.A.

New Registered Office Address:

9130 S DADELAND BLVD SUITE # 1509

Enter Florida street address

MIAMI

City

Florida 33156

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

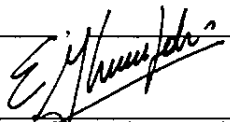
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VRDOLJAK NICOLAS BRANCO	LIBERTADOR 336 18B(1001)	<input type="checkbox"/> Add
		CAPITAL FEDERAL, C 00 000 AR	<input checked="" type="checkbox"/> Remove
MGR	SVIATKEVICH BEATRIZ ESTELA	LIBERTADOR 336 18B(1001)	<input type="checkbox"/> Add
		CAPITAL FEDERAL, C 00 000 AR	<input checked="" type="checkbox"/> Remove
MGR	G & G MANAGEMENT US LLC	9130 S DADELAND BLVD SUITE #1509	<input checked="" type="checkbox"/> Add
		MIAMI , FL 33156	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated _____



Signature of a member or authorized representative of a member

ELIZABETH VROOLJAK

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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